PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN					
TO	OTAL CLAIMS						RA	RATE		7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASK	BASIC FEE		OR	BASIC FEE	790.00	
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		•		X\$	X\$ 9=		OR	-X\$18=-		
INC	DEPENDENT C	LAIMS	ninus 3 =		*	·	X4	X44=		OR	X88=		
MI	ILTIPLE DEPE	NDENT CLAIM P	RESENT			+1					+300=	-	
* If the difference in column 1 is less than zero, enter "0" in column 2										OR	TOTAL		
CLAIMS AS AMENDED - PART II												THAN	
(Column 1) (Column 2) (Column 3)									ENTITY	OR	SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA	RA	Έ	ADDI- TIONAL FEE		FATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 7	Minus	- D	0	=	X\$	9=		OR	X\$18=		
AME	Independent	1. 2	Minus	***	3	=	X44	=		OR	X88=		
	FIRST PRESI	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	+300=		
								TAL			TOTAL ADDIT. FEE		
		(Column 1)	, 	(Colum	nn 2)	(Column 3)	ADDIT.					·	
AMENDATENT B	·	CLAIMS REMAINING AFTER ALCOHOMENT		HIGHE NUMB PREVIO PAID F	BER FUSLY	PRESENT EXTRA	RAT	E,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total		Minus	£-4.		. =	XSS	=	-j4.	OR	XS18=		
NAE	Independent					=,4	X44	=		OR	X88≈		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+300=		
		•				• .	OT			OR,	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	and the second s	CLAIMS REMAINING AFTER - AMENDMENT	e a Negligazio mun e Palmali al INDAN MES	HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	教		= · :	X\$ 9	=		OR	X\$18=		
ME	Independent	•	Minus	***	•	.	X44:			OR	X88=		
₹.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1			, ring		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								=		OR L	+300=		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter ""." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "."										OR A	DOIT. FEE		
	he Highest Nuл	nber Previously Pai	For (Total	or Independer	nt) is the	highest ment er	found in the	appi	ropriate box	tri cotu	mn 1	- 1. a - 2000 1	

Application or Docket Number